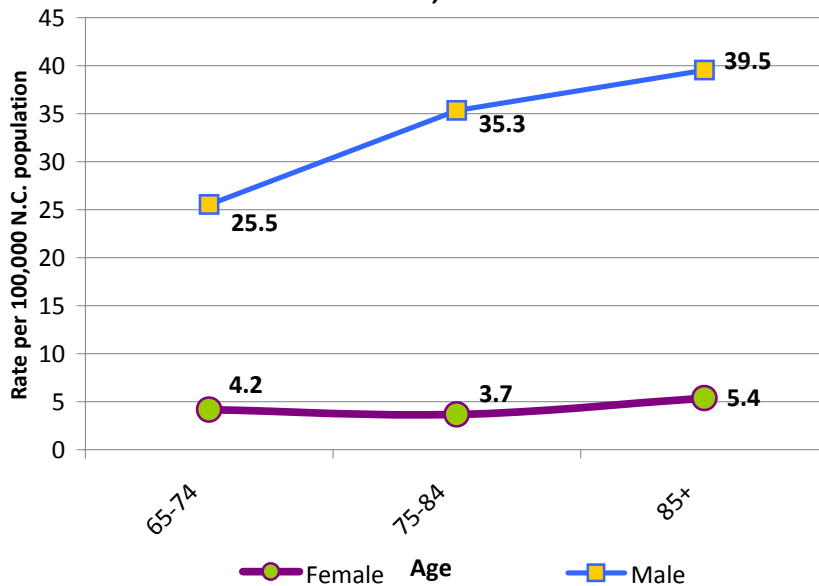


ELDER SUICIDE IN NORTH CAROLINA

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on deaths that occur in North Carolina resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention, and deaths for which intent could not be determined. NC-VDRS is a multi-source system that gathers information from death certificates, medical examiner reports, and law enforcement reports. The goal of this system is to aid researchers, legislators, and community interest groups in the development of public health prevention strategies to reduce violent deaths. NC-VDRS began collecting data in January 2004. This document summarizes deaths among North Carolina residents ages 65 plus completing suicide for the years 2008-2009.

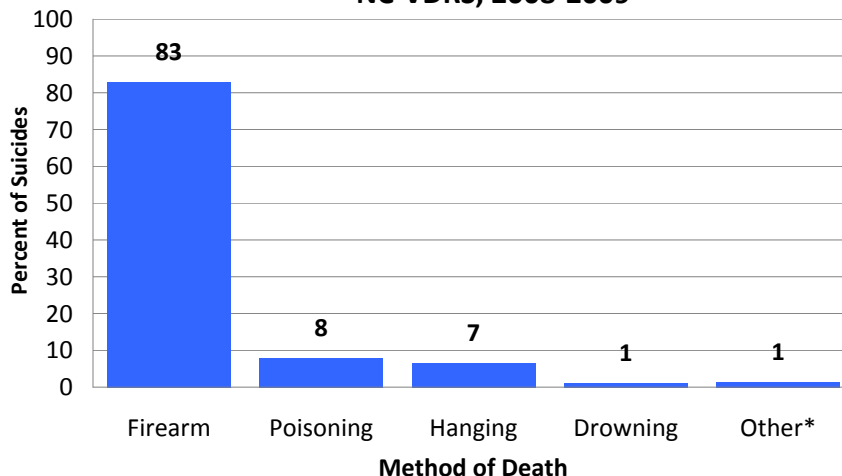
**Elder Specific Suicide Rates by Age Groups:
NC-VDRS, 2008-2009**



- From 2008 to 2009, 425 elder North Carolina residents died as a result of violence. Of those, 350 were suicide-related.
- The elder suicide rate was 14.9 suicides per 100,000.
- Eighty-four percent of elder suicides were male compared to female (16%).
- The suicide rate peaked among males 85 and older, but all male age groups were consistently higher than females.
- The peak for females was for those 85 and older.

- Ninety-four percent of elder suicide victims were identified as white, with the remaining 6 percent black, Asian and Amercian Indian.

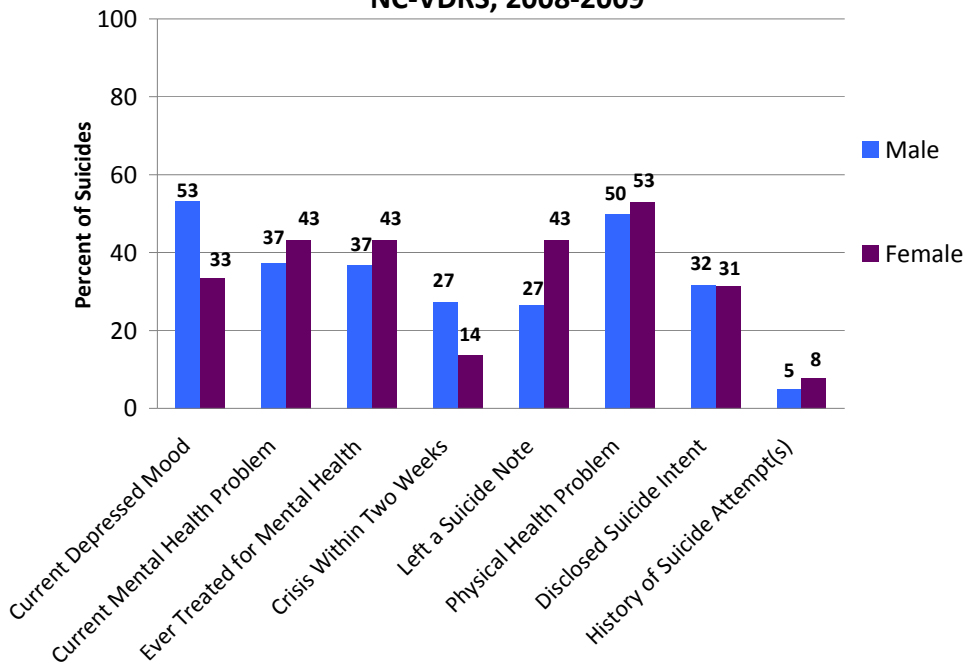
**Elder Suicide Method of Death:
NC-VDRS, 2008-2009**



- Overall, 83 percent of suicides involved firearms, followed by poisoning (8 %) and hanging/ strangulation/suffocation (7 %).
- Less than 3 percent of suicides were accomplished using a method other than firearms, poisoning or hanging.

*Other methods include: sharp instrument, fire/burns, motor vehicle and other.

Elder Suicide Circumstances*: NC-VDRS, 2008-2009



*Among those with reported circumstances

- More than half (53 %) of elder male suicide victims with circumstance information were categorized as being in a current depressed mood, compared to 33 percent of females.
- Thirty-seven percent of all elder males and 43 percent of elder females had been characterized as having a current mental health problem by a medical professional.
- Twenty-seven percent of elder males versus 14 percent of elder females had a crisis within the last two weeks.

- Thirty-two percent of males and 31 percent of females had disclosed their intent to commit suicide to someone else.
- Forty-three percent of females but only 27 percent of males left a suicide note.

More information on suicide prevention efforts can be found at:

State Resource Partners

N.C. Division of Mental Health, Developmental Disabilities and Substance Abuse Services

www.ncdhhs.gov/mhddsas

North Carolina Office of the Chief Medical Examiner

Contact: Krista Ragan, Child Death Investigator, 919-445-4414

www.ocme.unc.edu

The Triangle Consortium for Suicide Prevention

Contact: Phil Morse

www.trianglesuicideprevention.org

North Carolina Mental Health and Aging Coalition

www.med.unc.edu/aging/cgec/nc-mental-health-and-aging%20

National Resources

The Suicide Prevention Resource Center

www.sprc.org

The American Foundation for Suicide Prevention

www.afsp.org

The National Suicide Prevention Lifeline

(for suicide crisis calls)

1-800-273-8255

North Carolina Violent Death
NC VDRS
Reporting System

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 5U17/CE423098-09 from the Centers for Disease Control and Prevention (CDC).



N.C. Division of Public Health / www.publichealth.nc.gov / Injury Epidemiology & Surveillance Unit/ 919-707-5425

N.C. Violent Death Reporting System / 919-707-5432

State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov

N.C. DHHS is an equal opportunity employer and provider. 2008-2009 Provisional Data 10/11.

